



Sonoma County Regional Parks  
**ANNUAL PARK MEMBERSHIP ORDER FORM**  
(print and complete this form, then mail or fax as indicated below)

**PLEASE SEND ME AN ANNUAL PARKS MEMBERSHIP!**

**QTY TYPE OF MEMBERSHIP**

**TOTAL \$**

(For those age 60 and older only)

For those with permanent disabilities only; proof of eligibility required. Download and complete application, include with order form and payment.)

Contribution to the Regional Parks Foundation:

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**TOTAL DUE: \$** \_\_\_\_\_

- ☐ This is a NEW membership.
- ☐ This is a RENEWAL. My existing membership expires: \_\_\_\_/\_\_\_\_

**METHOD OF PAYMENT:**

- ☐ CHECK or MONEY ORDER (made payable to County of Sonoma)
- ☐ Visa or MasterCard

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiration Date (month/year): \_\_\_\_ / \_\_\_\_\_

**SEND MY MEMBERSHIP TO:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**Mail or FAX this completed order form with payment and proof of eligibility (if applicable) to:**

Sonoma County Regional Parks  
ATTN: Membership  
2300 County Center Dr, Ste 120A  
Santa Rosa, CA 95403

**(707) 579-8247 FAX**  
**(707) 565-2041 Phone**